

Asuncion, Paraguay

key cancer care gaps and priorities





ACTS & FIGURES

7,201,103

Paraguay population

3,360,000

Asuncion population¹

CANCER BURDEN IN PARAGUAY IN 20202

New cancer cases, males and females, all ages:

12,920

Cancer deaths, males and females, all ages:

6,565

Five most common cancers, males: prostate, lung, colorectum, stomach, testis

Cancer incidence rate, males and females:

191 (PER 100,000)

Cancer mortality rate, males and females:

95.5 (PER 100,000)

Five most common cancers, females: breast, cervix uteri, colorectum, thyroid, corpus uteri

- 1 Population Stat, World Bank, United Nations Census (Accessed 12 April 2021) (https://populationstat.com/paraguay/asuncion)
- 2 Global Cancer Observatory International Agency for Research on Cancer (Accessed 12 April 2021) (https://gco.iarc.fr/today/data/factsheets/populations/600-paraguay-fact-sheets.pdf)

Highlights
of the main
needs and
challenges
identified
for the city
of Asuncion:

This high level summary is based on the results of the full situational analysis report and the priorities set by the city.

Contributions to the Needs Assessment:

202

healthcare professionals from 16 institutions

151 patients

Asuncion, the capital city of Paraguay joined the City Cancer Challenge (C/Can) in August of 2017. Supported by C/Can's network of local, regional and global partners and experts, Asuncion embarked on a process to identify, design and develop sustainable cancer care solutions that respond to local needs.

As a first step, C/Can convened a City Executive Committee (CEC) bringing together representatives from the main public and private institutions providing cancer care in Asuncion, local and national government, academia, and civil society, to guide and oversee the C/Can process.

One of the foundational steps in the C/Can process is a data-driven needs assessment to identify key gaps and opportunities for improving access to quality cancer care. The needs assessment is guided by a questionnaire designed to systematically collect data on the quality and capacity of cancer care services in the city. It addresses the extent to which patients are placed at the centre of care by also assessing community access and integration of care within the city.

The City Executive Committee's first task was to convene a multi-disciplinary Technical Committee of 23 local experts from 9 institutions, with expertise in the quality, management and delivery of cancer care, to coordinate a city-wide needs assessment. Together, they identified institutions that, based on their contribution to cancer care, should participate in data collection. The Technical Committee also convened a wider network of local experts that would collaborate as part of 15 inter-institutional, topic-specific working groups (incl. nuclear medicine, pathology, radiotherapy, medical oncology, surgery, childhood cancer, human resources development, quality, and access among others) to collect data, and analyse and interpret the findings.







Availability of cancer care services

Diagnostic laboratories (clinical and pathology labs) and blood bank	Medical imaging (radiology and nuclear medicine)
 Lack of standardisation in pathology reporting Lack of quality standards for samples processing and other procedures in many laboratories Immunohistochemical test not available in some public sector pathology labs 	· Insufficient, outdated or faulty equipment in some public sector centres · Poor distribution and use of equipment
Surgical Care	Palliative and supportive care
· Absence of a quality assurance programme for surgical cancer care	· Limited supply of opioids
Medical oncology (adult and paediatric)	Radiotherapy
· National list of essential cancer medicines is not aligned with latest WHO guidance	· Insufficient capacity (both in terms of equipment and human resources) for radiotherapy





Management of cancer care services

(including education and professional training)

- · Fragmentation and segmentation of the healthcare system
- Lack of standardisation in the education and training of healthcare professionals involved in cancer diagnosis, treatment and care

Quality of cancer care services

- Lack of standardisation and accreditation of cancer services
- · Limited occupational health and safety measures
- Insufficient oncology specialists impacts workforce time management (specialists support various institutions, work part-time and have to multitask frequently)
- Ethic committees have not been created in most healthcare institutions
- Lack of institutional multidisciplinary approach and city-adapted treatment guidelines
- · Absence of data management system

Community access to cancer care services

- · Inequity in the classification and treatment of disabled and indigeonous patients
- · Lack of strategies for tracking and accompanying patients through diagnosis and treatment
- Lack of cancer education/awareness in the general public often resulting in delayed diagnosis

Translating needs into action



Following the needs assessment, C/Can supports an action planning exercise that results in a City Roadmap for Cancer Care. This city-led plan guides the prioritisation and development of 8-12 city projects, as well as identification of resource mobilisation, capacity development and technical cooperation needs.

In Asuncion, 7 projects have been prioritised to address priority gaps including in the areas of pathology, radiotherapy and multidisciplinary care. In parallel, C/Can is collaborating closely with local stakeholders including RENACI, the National Cancer Institute, National University of Asuncion and others to strengthen local capacity, leadership and an enabling policy environment to ensure the sustainability and long-lasting impact of city projects on access to quality cancer care, and ultimately patient outcomes. Learn more about progress in Asuncion in the latest C/Can Activity Report.

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* Institutions that have contributed data to the needs assessment process in Asuncion (listed alphabetically)